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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

1253681

| OMB Number: |
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| Expires: |
| Estimated average burden |
| nours per response 16.00 |
| |



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| SEC USE O | NLY |
|-----------|--------|
| Prefix | Serial |
| | |
| DATE RECE | IVED |

| Name of Offering (check if this is an amendment and name has changed, and indicate change | E) REVIEWED EST | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| Phoenix Realty Tax Credit Fund IV L.P. | 197 V | | | | | | | | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE 10 10 2003 | | | | | | | | | |
| Type of Filing: New Filing Amendment | | | | | | | | | |
| A. BASIC IDENTIFICATION DATA | | | | | | | | | |
| Enter the information requested about the issuer | | | | | | | | | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | .c | | | | | | | | |
| Phoenix Realty Tax Credit Fund IV L.P. | | | | | | | | | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) | | | | | | | | |
| 535 Madison Avenue, 26th Floor, New York, NY 10022 | (212) 207-1999 | | | | | | | | |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) | | | | | | | | |
| (if different from Executive Offices) | | | | | | | | | |
| Brief Description of Business: To invest in operating partnerships formed to hold interests in | apartment complexes qualifying for low | | | | | | | | |
| income housing tax credits | | | | | | | | | |
| | | | | | | | | | |
| Type of Business Organization | _ | | | | | | | | |
| corporation imited partnership, already formed | other (please specify): | | | | | | | | |
| business trust limited partnership, to be formed | DKOCESSEE | | | | | | | | |
| Month Year | | | | | | | | | |
| Actual or Estimated Date of Incorporation or Organization: 1 0 0 2 | □ other (please specify): PROCESSED ☑ Actual □ Estimated □ JUL 1 4 2003 | | | | | | | | |
| | | | | | | | | | |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for | or State: | | | | | | | | |
| CN for Canada: FN for other foreign jurisdiction) | DE FINANCIAL | | | | | | | | |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



| Enter the information reEach promoter of the | • | following: suer has been organized v | within the past five years: | | |
|---|----------------------------------|---|-----------------------------|------------------|---|
| Each beneficial own | | | • | ition of, 10% or | more of a class of equity securities of |
| the issuer; • Fach executive offi | cer and director a | of cornorate issuers and o | f cornorate general and m | anaging partner | s of partnership issuers; and |
| | | of partnership issuers. | i corporate general and in | anaging partners | s of partifership issuers, and |
| Check Box(es) that Apply: Managing Partner | Promoter | ☐ Beneficial Owner | Executive Officer | Director | ☐ General and/or |
| Full Name (Last name first, | if individual) | | 1.00 | | |
| Phoenix Realty GP LLC | | | | | |
| Business or Residence Add 535 Madison Avenue, 26 th | ress (Number a Floor, New You | ind Street, City, State, Zip k, NY 10022 | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | ☐ General and/or |
| Full Name (Last name first, Fried, J. Michael | if individual) | | | | |
| Business or Residence Add 535 Madison Avenue, 26 th | | | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | | Director | General and/or |
| Full Name (Last name first, Rosenthal, Keith B. | if individual) | | | | |
| Business or Residence Addi 535 Madison Avenue, 26 th | | | Code) | | |
| Check Box(es) that Apply: | Promoter | ⊠ Beneficial Owner | ☑Executive Officer | Director | General and/or |
| Full Name (Last name first, Orgel, E. Ron | if individual) | | | | |
| Business or Residence Addi 535 Madison Avenue, 26 th | ress (Number a Floor, New Yor | nd Street, City, State, Zip k, NY 10022 | Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number a | nd Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ress (Number a | nd Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number a | nd Street, City, State, Zip | Code) | | |
| | | | | | |

A. BASIC IDENTIFICATION DATA

| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | <u> </u> | | | OUT OFF | | | | | |
|--|---|---------------|---------------|---------------|--------------|---------------|-------|---------------------------------------|----------|---------------|---------|---|--------------|
| 2. What is the minimum investment that will be accepted from any individual? | Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | | No ⊠ | | |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be bixed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Phoenix Really GP LLC Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IN] [IN] [IN] [IN] [IN] [IN] [IN] [I | | | | | | | | | | | | <u>)</u> | |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with asles of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer information for that broker or dealer only. Full Name (Last name first, if individual) Phoenix Realty GP LLC Business or Residence Address (Number and Street, City, State, Zip Code) \$355 Madison Avenue, 26th FL, New York, NY 10022 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [III.] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MI] [MI] [MN] [MN] [MN] [MN] [MN] [MN] [MN] [MN | 3. Does the offering permit joint ownership of a single unit? | | | | | | | | | | | | |
| Paul Name (Last name first, if individual) Phoenix Realty GP LLC | commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a | | | | | | | | | | Ц | A | |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "Alf States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [HI] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] [WV] [PR] [WV] [PR] [WV] [WI] [WV] [PR] [WV] [WV] [WV] [WV] [PR] [WV] [WV] [WV] [WV] [PR] [WV] [WV] [WV] [WV] [WV] [WV] [WV] [WV] | Full Name | (Last name | first, if inc | | | | | | | | | · | |
| All States Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | | | | | | | Code) | | | | | | |
| Check "All States" or check individual States | Name of A | Associated E | Broker or Do | ealer | | | | | | | | | |
| Check "All States" or check individual States | | | | | | | | | | | | | |
| III.] | | | | | | | | | | | | | All States |
| MTT | | [AK] | | | | | | | | [FL] | [GA] | [HI] | [ID] |
| [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | | | | | | | | | | | • | | |
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| Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | Full Name | (Last name | first, if ind | ividual) | | | | | | | | | <u> </u> |
| Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | | | | | | | | | | | | | |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | Business o | r Residence | Address (N | Number and | Street, Cit | y, State, Zip | Code) | <u> </u> | | . | · | | |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | | | | | | | | | | | | | |
| (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | Name of A | ssociated B | broker or De | ealer | | | | | | | | | |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] | | | | | | | | | | | | | All States |
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| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] | | | | | | | | | | | | | |
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| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] | | | | | | | | | | | | | All States |
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| | [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| | | | | | | | | | | | | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US | SE OF PROCEE | DS | |
|----|--|---------------------------|----|--|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security | Aggregate Offering Pri | | Amount Already Sold |
| | Debt | | | |
| | Equity | · | | |
| | ☐ Common ☐ Preferred | | | |
| | Convertible Securities (including warrants) | | | |
| | Partnership Interests | \$17,812,179.45 | | \$17,812,179.45 |
| | Other (Specify) | | | |
| | Total Answer also in Appendix, Column 3, if filing under ULOE. | | | \$17,812,179.45 |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number Investors | | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | 1 | | |
| | | | | \$17,812,179.45 |
| | Non-accredited Investors | | | |
| | Total (for filings under Rule 504 only) | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering | Type of Security | | Dollar Amount Sold |
| | Rule 505 | | | |
| | Regulation A | | | |
| | Rule 504 | | | |
| 1. | Total | | | 0 |
| | Transfer Agent's Fees | | | \$ |
| | Printing and Engraving Costs | | | \$ |
| | Legal Fees | | | \$ |
| | Accounting Fees | | | \$ |
| | Engineering Fees | | | \$ |
| | Sales Commissions (specify finders' fees separately) | | | \$ |
| | Other Expenses (identify) Organization and Offering Expense Reimbursement | | | \$ 534,365.38 |
| | Total | | | \$ 534,365.38 |

| | C. OFFERING PRIC | LE, NUMBER OF INVESTORS, EXPENSES A | עמ – | JSE OI | PROCEEDS | _ | |
|-----|--|---|-------------|----------|--|---------|-----------------------|
| | total expenses furnished in response to Part C | offering price given in response to Part C - Question - Question 4.a. This difference is the "adjuste" | d gro | | | | \$17,277,814.07 |
| 5. | Indicate below the amount of the adjusted gross process the purposes shown. If the amount for any purpose left of the estimate. The total of the payments listed in response to Part C - Question 4.b above. | the | | | | | |
| | | | | | Payments to Officers, Directors, & Affiliates | | Payments to Others |
| | Salaries and fees | | \boxtimes | \$ 76 | 9,486.15 | _ 🗆 | |
| | Purchase of real estate | | | | | | |
| | Purchase, rental or leasing and installation of | machinery and equipment | | | | | |
| | • | d facilities | | | | | |
| | Acquisition of other business (including the offering that may be used in exchange for the | value of securities involved in this | | | | | |
| | • • | | | | | _ _ | F2(7.192.60 |
| | Working capital reserves Other (specify): Non-accountable expense reimbursement | | ⋈ | \$ 356 | ,243.59 | | \$267,182.69 |
| | | | | | | _ | |
| | Investments in operating partnerships | | | | | _ 🛛 | \$15,884,901.64 |
| | Column Totals | | \boxtimes | \$ 1,1 | 25,729.74 | _ 🛛 | \$16,152084.33 |
| | Total Payments Listed (column totals added) | | | × | \$17,277 | ,814.07 | <u> </u> |
| | | D. FEDERAL SIGNATURE | | | | | |
| sig | ature constitutes an undertaking by the issuer to | y the undersigned duly authorized person. If this furnish to the U.S. Securities and Exchange Complited investor pursuant to paragraph (b)(2) of Rule 2 | nissic | | | | |
| Iss | er (Print or Type) | Signature | | | Date | | |
| | oenix Realty Tax Credit Fund IV L.P. Phoenix Realty GP LLC | | | | June 25, 2003 | | |
| Nai | ne of Signer (Print or Type) | Title of Signer (Print or Type) Managing Director | | _ | | | |
| _ | | . L | | | | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | C. OFFERING PRIC | E, NUMBER OF INVESTORS, EXPENSES A | ND I | J SE OF | PROCEEDS | | |
|-----|--|--|-------------|----------------|--|----------|-----------------------|
| | total expenses furnished in response to Part C | ffering price given in response to Part C - Questice - Question 4.a. This difference is the "adjusted or control of the contro | ed gro | | | | \$17,277,814.07 |
| 5. | Indicate below the amount of the adjusted gross pr the purposes shown. If the amount for any purpose left of the estimate. The total of the payments listed in response to Part C - Question 4.b above. | the | | | | | |
| | an responde to the control and the control | | | Ε | ayments to Officers, Oirectors, & Affiliates | | Payments to Others |
| | Salaries and fees | | \boxtimes | \$ 769 | 9,486.15 | _ 🗆 | |
| | Purchase of real estate | | | | | 🗆 | |
| | Purchase, rental or leasing and installation of | machinery and equipment | | | | _ 🗆 | |
| | | facilities | | | | _ 🗆 | |
| | Acquisition of other business (including the volfering that may be used in exchange for the issuer pursuant to a merger) | | | | | | |
| | | | | <u>\$ 356,</u> | 243.59 | | \$267,182.69 |
| | Investments in operating partnerships | | | | | | \$15,884,901.64 |
| | Column Totals | | \boxtimes | \$ 1,12 | 25,729.74 | _ 🛛 | \$16,152084.33 |
| | Total Payments Listed (column totals added) | | | \boxtimes | <u>\$17,27</u> | 7,814.07 | |
| | | D. FEDERAL SIGNATURE | | | | | |
| sig | e issuer has duly caused this notice to be signed be nature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accred | furnish to the U.S. Securities and Exchange Comi | missio | | | | |
| Iss | uer (Print or Type) | Signature | | I | Date | | |
| | noenix Realty Tax Credit Fund IV L.P. | C Sen Cronl | | J | June 25, 2003 | 3 | |
| | y: Phoenix Realty GP LLC me of Signer (Print or Type) | Title of Signer (Print or Type) | | | | | |
| | E. Ron Ovacl | Managing Director | | | | | |
| | . · wuv \ U Y ~ &\ | , 5 5 | | | | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)